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FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
MetLife Inc. Employees' Political Participation Fund A - Federal Only				
1				
ADDRESS (number and street)	1095 Avenue of the A	mericas		
(Check if address is changed)				
	New York		NY	10036
		CITY	STATE	ZIP CODE 📥
COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)				
(Check if address	jamaral@metlife.com			
is changed)	1	11111111		
COMMITTEE'S WEB PAGE ADDRESS (URL)				
(Check if address	n/a			
is changed)		<u></u>	 	
2. DATE M.M. / D.D. / Y.Y.Y.Y.				
02 23 2011				
3. FEC IDENTIFICATION NUMBER C				
4 10 THE OTATEMENT V				
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)		
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete				
Type or Print Name of Treasurer Timothy J Ring				
Type or Print Name of Treasurer	- Timothy o King			
Signature of Treasurer	lan Ay	Da Da	ie 02 ^M /	23 ' 2011
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS				
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)